

## DECLARATION FOR UTILITY PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if more than one name is listed below) of the subject matter that is claimed and for which a patent is sought on the invention entitled

### System and Method For Tokenless Biometric Electronic Script

The specification of which is attached hereto.

The specification of which was filed on \_\_\_\_\_ as part of application no. \_\_\_\_\_

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information that is material to the patentability of the invention as claimed in this application in accordance with Title 37, Code of Federal Regulations, Section 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Application Ser. No.	Country	Day/Month/Year Filed

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56 that occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Ser. No	Filing Date	Status
09/244,784	February 5, 1999	Allowed
08/705,399	August 29, 1996	Issued
08/442,895	May 17, 1995	Issued
08/345,523	November 28, 1994	Issued

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor: Ned Hoffman

Inventor's signature: 

Date: 11/12/99

Residence: Sebastopol, California      Citizenship: United States

Post Office Address: 977 Daniel Street, Sebastopol, California, 95472

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of )  
                        ) Art Unit: N/A  
Hoffman, et al. )  
                        ) Examiner: N/A  
Application. N/A )  
                        )  
                        )  
Filed:              )  
                        )  
                        )  
For: System and Method For Tokenless ) POWER OF ATTORNEY  
Biometric Electronic Scrip )  
                        )  
                        )

Honorable Commissioner of Patents  
and Trademarks  
Washington, D.C. 20231

Sir:

SMARTTOUCH, Inc., a corporation of the State of Delaware, hereby  
appoints;

KAMAREI, Ali (37,000);

as its attorney with full power of substitution to prosecute this application,  
and to transact all business in the Patent and Trademark Office in connection  
therewith. Please direct all correspondence to the following:

SMARTTOUCH, Inc.  
Ali Kamarei, Esq.  
727 Allston Way  
Berkeley, California 94710  
Telephone: (510) 843-3034

Date: 11/12/99

  
Ned Hoffman  
Vice President

SmartTouch, Inc.

CERTIFICATE UNDER 37 CFR 3.73

Applicants: Hoffman et.al

Application No.: \_\_\_\_\_ Filed: \_\_\_\_\_

Entitled: System and Method For Tokenless Biometric Electronic Scrip

SMARTTOUCH, Inc., a Corporation,  
(name of assignee)

certifies that is the assignee of the entire right, title and interest in the patent application identified above by virtue of either:

[X] An assignment from the inventor(s) of the patent application identified above. The assignment was recorded in the Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

OR

[ ] A chain of title from the inventor(s), of the patent application identified above, to the current assignee as shown below:

1. From \_\_\_\_\_ To: \_\_\_\_\_

The document was recorded in the Patent and Trademark Office at  
Reel \_\_\_\_\_, Frame \_\_\_\_\_, for which a copy thereof is attached.

2. From \_\_\_\_\_ To: \_\_\_\_\_

The document was recorded in the Patent and Trademark Office at  
Reel \_\_\_\_\_, Frame \_\_\_\_\_, for which a copy thereof is attached.

3. From \_\_\_\_\_ To: \_\_\_\_\_

The document was recorded in the Patent and Trademark Office at  
Reel \_\_\_\_\_, Frame \_\_\_\_\_, for which a copy thereof is attached.

The undersigned has reviewed all the documents in the chain of title of the patent application identified above and, to the best of undersigned's knowledge and belief, title is in the assignee identified above.

The undersigned (whose title is supplied below) is empowered to act on behalf of the assignee.

I hereby declare that all statements made herein of my own knowledge are true, and that all statements made on information and belief are believed to be true; and further, that these statements are made with the knowledge that willful false statements, and the like so made, are punishable by fine or imprisonment, or both, under Section 1001, Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Date: 11/12/99

Signature: Ned Hoffman

Name: Ned Hoffman  
Title: Vice President  
SmartTouch, Inc.